



# Little Traverse Bay Bands of Odawa Indians Michelle Chingwa Education Assistance Scholarship Enrollment Verification Form

In order for our Tribal Education Department to fully award this student, it is required that the student verify their enrollment. We appreciate your assistance. **Please have a *school official* complete the following information and mail the form to:**

**LTBB Education Department**  
**Attn: Higher Education**  
**7500 Odawa Circle**  
**Harbor Springs, MI 49740**

## **PLEASE NOTE THAT WE DO NOT ACCEPT FAXED FORMS**

Completed By Student { I \_\_\_\_\_ give permission for the appropriate school  
(PRINTED name of student and Student ID Number)  
official at \_\_\_\_\_ to complete the  
(Institution)  
following and send it to the LTBB Education Department.  
\_\_\_\_\_  
(Signature of student)

**Please note this form will not be accepted before the 100% drop/add period is over. It will be returned to the student.**

Completed By Enrollment Officer { Current semester the student is enrolled in: **Fall / Winter / Spring / Summer**  
Current number of credit hours the student is enrolled in: \_\_\_\_\_ (please include exact number as our scholarship depends on it)  
\_\_\_\_\_  
(Date of Verification)  
\_\_\_\_\_  
(Authorizing Enrollment Signature)  
\_\_\_\_\_  
(Printed Name)  
\_\_\_\_\_  
(Title)  
\_\_\_\_\_  
(Official Seal)